As a below named inve	entor, I hereby declare that:					
1	e address, and citizenship are		y name.		*	
I believe I am the origina names are listed below)	I, first and sole inventor (if on of the subject matter which is	nly one name is listed below s claimed and for which a pa) or an original, atent is sought o	n the invention e	ntitled:	
names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: Antibodies and Peptide Antigens for Producing Antibodies Having a Selective Binding Specificity						
the specification of which (Title of the Invention) is attached hereto OR						
was filed on (MM/	DD/YYY)	as Unite	d States Applica	ation Number or F	PCT International	
Application Number		vas amended on (MM/DD/Y			(if applicable).	
I hereby state that I have a amended by any amendm	eviewed and understand the ent specifically referred to ab	contents of the above iden	tified specification	on, including the c	aims, as	
	disclose information which is		defined in 37 CF	FR 1.56.		
America, listed below and hi	ity benefits under 35 U.S.C. PCT international application ave also identified below, by application having a filing date	checking the box sourfered	st one country	other than the U		
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Co	py Attached?	
			0000	0000	0000	
Additional foreign applica	tion numbers are listed on a	supplemental priority data	sheet PTO/SB/0	28 attached here	ito.	
hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.						
Application Number	(S) Filing Date	(MM/DD/YYYY)	numbe supple	nal provisional rs are listed on mental priority B/02B attached	a data sheet	
		ı			1	

[Page 1 of 2]

Burden Hour Statement This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO Assistant Commissioner for Patents, Washington, DC 20231.

Please	type a	plus	sign (+)	inside this	box		+
Please	type a	pius	sign (+)	inside this	DOX	_	L.'

PTO/SB/01 (12-97)
us sign (+) inside this box

+ Approved for use through 9/30/00. OMB 0651-0032

Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number

DECLARATION — Utility or Design Patent Application

United States United States information wh	or PCT I	International app naterial to patent	w and, ms plication in itability as	of any United Si isofar as the sub in the manner pro- is defined in 37 C of this application	rovided by the CER 1.56 w	er or ea	ach of th	ne claims of t	this appli	lication	is not disclose	d in the prio
U	.S. Par	rent Applica Num		PCT Parent	t			iling Date	, T	Par	rent Patent	
					Titry -	7,1.1			III мрр	DIE)		
☐ Additional	I U S. or	PCT internation	ial applica	ation numbers ar	re listed on	a sup	plement	al priority data	a sheet f	PTO/SE	3/02B attached	hereto.
As a named inv	ventor. Li	hereby appoint t	the follows with.	nng registered pr Customer Num OR Registered prac	practitioner(s	(s) to pr) 766	rosecule 63	this applicati	tion and t	to trans	act all business Place Cus Number Ba	s in the Pater tomer or Code
	Nar			Regist	tration	hamer	registrati	tion number li Nan		ow -	Reg	istration
Matthe	Nam ⊃wr ∆	. Newbo	-100		mber 2 /		 	110.	ne		N ₁	umber
Mattine	}₩ m	. Newpo	ites	36,22	<u>'4</u>							
Additional r	registere	d practitioner(s)	named o	on supplemental	Registerer	d Praci	titioner Ir	nformation sh	ieet PTO	/SB/02	C attached her	eto
Direct all corre			Custom	ner Number Code Label	007			OR			ondence add	
Name	Ma	tthew A	. N∈	ewboles	3							
Address	ST	ETINA F	RUNI	DA GARR	≀ED &	BF	RUCK	ER				
Address	243	221 Cal	.le d	de la L	Jouis	a,	4th	F100	r			
City	<u> </u>	guna Hi	.11s				late	CA	ZIP	92	653	
Country	US			Telephone	.~			1246	Fax		49)855	
punishable by f	fine or in	o iunner inai in	nese statei r both, und	in of my own kr ements were ma nder 18 U.S.C.	iade with th	he know	iwledne t	that willful fal	oleo etato	monte	and the like o	a mada a.a
Name of So	le or F	First Invento	r:				petition	n has been	filed for	r this u	unsigned inve	entor
Giv	ven Nar	me (first and m	niddle [if	anyl)				Family	y Name	or Su	mame	
	char	rd J.						Zahra				
Inventor's Signature		Ru	hou	dg.	30	an c	x Ou	₩			Date	12-5-00
Residence: Ci	ity	Dana P	oint	State	CA	1	ountry	USA			Citizenship	US
Post Office Ad	idress	33142	Acar	oulco D	rive							
Post Office Ad	dress											
City		Dana Point	State	CA	ZIP	9	267	3	Coun	ntry	USA	
J Additional ii	inventor	s are being na	amed on	the sup	olementa'	l Addi	tional ir	ventor(s) s	heet(s)	PTO/S	SB/02A attac	had harata

Please type a	plus sign (+)	inside this	box 🛶	+

PTO/SB/02A (3-97)

Approved for use through 9/30/98. OMB 0651-0032

Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number

DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet Page 3_ of 3_

Name of Additio	nal Joint Inventor, if	any:] A petiti	on has been file	ed for th	nis unsig	gned ir	nventor
Given Na	Given Name (first and middle [if any]) Family Name or Surname									
Jeffrey R. / Lavigne										
Inventor's Signature	1 Steen	Tw	vca	N)			12/3 Dat	100	
Residence: City	San/Nuan/ Capistrano	State	CA		Country	USA		Citizen	ship	US
Post Office Address	31881 Via F	lores	3							
Post Office Address										
City	San Juan Capistrano	State	CA		ZIP	92675	Country	ט ע	SA	
Name of Addition	nal Joint Inventor, if a	any:			A petitio	on has been file	ed for th	ıs unsig	ned in	ventor
Given Na	me (first and middle [if ar	ıy])				Family Na	me or S	Surname)	
Inventor's Signature								Da	ate	
Residence: City		State			Country			Citize	nship	
Post Office Address										
Post Office Address										
City		State			ZIP		Coun	try		
Name of Addition	nal Joint Inventor, if a	ny:			A petitio	n has been file	d for thi	s unsigr	ned inv	ventor
Given Nar	ne (first and middle [if an	y])				Family Nar	ne or S	urname		
Inventor's Signature	Date									
Residence: City	State Country Citizenship									
Post Office Address										
Post Office Address					1	···				
City		State			ZIP		Co	untry		

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time, you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED. FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

POWER OF ATTORNEY OR AUTHORIZATION OF AGENT,

Application Number unknown Filing Date herewith First Named Inventor R.J. Zahradnik **Group Art Unit** Examiner Name Attorney Docket Number IMUNE-001A

I hereby a	ppoint:						
OR		Customer Number	007663			Place Cu Number Label he	Bar Code
Practit	ioner(s)	named below:					
<u> </u>		Name			Registrat	ion Numbe	er
<u> </u>							
		(s) or agent(s) to pro				ove, and to	transact ali
business ir	the Pai	tent and Trademark	Office connected	therew	rith.		
						/	
Please cha	nge the	correspondence add	dress for the abov	e-iden	tified applic	ation to:	
	•	ntioned Customer Nu		C IGOI	unca applic	auon to.	
	ove-mei	Moned Castomer No	mber.				
OR		<u> </u>					
X Firm or Individua	al Name	STETINA BRUN	DA GARRED &	BRU	CKER		
Address		24221 Calle	do la Touig	1	th Elec		
Address		21221 Cario	ue la nouis	a, 1	CII 1 1001		
City		Lagana Hills		State	CA	ZIP	92653
Country		IISA					
Telephone		(949)855-124	6	Fax	(949)	355-637	1
l am the					,		
	 plicant.						
	piican.						
As	signee d	of record of the entire	interest				
		under 37 CFR 3.73(
		SIGNATURE of A	Applicant or Assign	nee of l	Record		
Name	Ric	hard J. Zahra	dnik, Presi	dent	of Imm	ınotopi	cs. Inc.
Signature	Richard J. Zahradnik, President of Immunotopics, Inc.						
Date	٠,٠		VIOL CO DIGITAL				
-410		12-5-00					

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

PTO/SB/10 (1-99)

Approved for use through 09/30/2000. OMB 0651-0031

Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

STATEMENT CLAIMING SMALL ENTITY STATUS (37 CFR 1.9(f) & 1.27(c))SMALL BUSINESS CONCERN	Docket Number (Optional) IMUNE-001A
Applicant, Patentee, orldentifier: Application or Patent No.: Filed or Issued: Title: Antibodies and Peptide Antigens for Proceedings	
I hereby state that I am the owner of the small business concern identified below: an official of the small business concern empowered to act on behalf of the concern	n identified below:
NAMEOFSMALLBUSINESS CONCERN IMMUTOPICS, INC. ADDRESS OF SMALLBUSINESS CONCERN 929 Calle Negocio, San Clemente, California 92673	Suite A
I hereby state that the above identified small business concern qualifies as a small bus 13 CFR Part 121 for purposes of paying reduced fees to the United States Patent and Tradems to size standards for a small business concern may be directed to: Small Business Administ 409 Third Street, SW, Washington, DC 20416.	rark Office Ouestions related
I hereby state that rights under contract or law have been conveyed to and remain with identified above with regard to the invention described in:	the small business concern
the specification filed herewith with title as listed above. the application identified above the patent identified above.	
If the rights held by the above identified small business concern are not exclusive, organization having rights in the invention must file separate statements as to their status as to the invention are held by any person, other than the inventor, who would not qualify as an 37 CFR 1.9(c) if that person made the invention, or by any concern which would not qualify a under 37 CFR 1.9(d), or a nonprofit organization under 37 CFR 1.9(e).	small entities, and no rights
Each person, concern, or organization having any rights in the invention is listed below no such person, concern, or organization exists each such person, concern, or organization is listed below.	c
Separate statements are required from each named person, concern or organization has stating their status as small entities. (37 CFR 1.27)	aving rights to the invention
I acknowledge the duty to file, in this application or patent, notification of any change is entitlement to small entity status prior to paying, or at the time of paying, the earliest of the iss fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.2	sue fee or any maintenance
NAME OF PERSON SIGNING	
TITLE OF PERSON IF OTHER THAN OWNER President	7
ADDRESS OF PERSON SIGNING 33142 Acapulco Drive, Dan	ia Point CA
SIGNATURE Ruboud J. Zahadud DATE_	12.5-00